



**DEPARTMENT OF HUMAN SERVICES**  
**SENIORS & PEOPLE WITH DISABILITIES**  
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**AUTHORIZED BY:** \_\_\_\_\_  
**Administrator**

**INFORMATION MEMORANDUM**  
**SPD-IM-03-030**  
**Date: March 26, 2003**

**TO:** Area Agency on Aging Directors CHS SDA Managers  
CHS/AAA Field Managers and Staff CHS SDA Assistant Managers  
SPD Managers and Staff CHS Central Office Managers

**SUBJECT:** Systems Conversion/Action Related to SPD Budget Actions

**INFORMATION:** Please see the attached description of the systems actions that are being taken to support the reduction or closure of benefits as a result of DHS budget limitations.

Please refer all calls to the Help Desk. We are relying on them to help us identify issues.

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Seniors and People with Disabilities, Office of Planning and Program Development  
Information Systems Coordination/Payment Processing Unit Manager

**CONTACT:** DHS Help Desk

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Attachment

## **Systems Actions to Reduce or End Benefits**

### **What will happen on CMS?**

On the night of 3/26/03, we will run a systems conversion to change the CMS records of those clients who lose service eligibility due to the service level cuts.

The conversion will skip all cases with an Aid Paid Pending resource (APP). Then, each case coded with a service category case descriptor (APD/BPA/BPR/ ICP/NFC/ PAC/SPH/WAV) or a service need (EC/HA/HK/ICP/MH/MR/MS/ MVC/NH/SAM/SS/SVC) will be checked. If the service eligibility record (created by the Oregon ACCESS update) is 12-14, expired or non-existent, the service category codes, the service need code and any waiver related income reduction codes (for example, INT) will be removed.

Cases that are over income for OSIP/OSIP-M will be converted to QMB, SMB or SMF only if the QMB/SMB/SMF case descriptor is on the case and the case meets the income requirements. Cases without the QMB/SMB/SMF coding or who are over the income limit for the program they are coded for will be closed.

The information from CMS updates the MMIS Recipient file (ELGR) during the nightly processing.

### **What about CBC, Community Based Care records?**

Under the normal process CBC (512) records suspend. We will run a special process to automatically close records if the survival priority level on the service eligibility file is more than 11. This will be done between 3/26/03 and 4/3/03.

### **What about CEP, Client Employed Provider Vouchers?**

As stated in IM-03-011, we implemented a new process regarding future effective vouchers. Vouchers for service periods 4/1/03 or later have been held and not printed. On the night of 3/26/03, we will review this pool of vouchers and print them according to the following criteria.

If the processing transaction code is 30 and the begin date is after 04/01/03 and if the voucher is for an OC111, OC112, OC115, OT111, SP111 procedure code, the system will check for an open CMS case with an APD, BPA, BPR or SPH service category case descriptor. If the case is still open and is coded as service eligible, the voucher will be printed. If the case does not meet these requirements the voucher will be canceled (process transaction code 10).

Personal Care - The HATH screen will continue to allow the use of the OC111 code for clients who are coded as personal care only (BPA C/D with the HK N/R). It will limit the voucher to 20 hours per month. Oregon ACCESS is now passing the Personal Care Eligibility flag (PCS = Yes or No), to the mainframe CA/PS Service Eligibility tables (SSEQ/SSEI). If a

client has a record with a “Y” Personal Care flag, the CMS record will allow the use of the BPA/BPR service category code. The flag now displays on the Oregon ACCESS CA/PS assessment.

### **What about Client-Pay-in?**

The Pay-in billings will be delayed a few days. We will use the information from the Pay-in files and check the corresponding CMS record. If the case is an A1, B3 or D4 and is in CP or VP status it will leave the Pay-in record unchanged. If it does not find an open CMS record, the Pay-in liability and yearly account records will be automatically closed. This will be done between 3/26/03 and 4/3/03.

### **What about Nursing Facility (ELGF) records?**

NF payments are made by OMAP through MMIS. Local office staff will need to close the ELGF record. If the ELGR recipient record is closed, payments will suspend. If the ELGR recipient record is open and the ELGF file is not closed payments may continue.

### **What about Oregon ACCESS?**

Local staff will need to update the service plan and the 546 form to close the CA/PS record for people no longer in service.

### **Will Food Stamps be Automatically Adjusted?**

Every month the Food Stamp system automatically brings in the latest CM benefit amounts. Changes in the grant payments will be reflected in Food Stamps through this routine process (unless the process has been overridden by the BYP, MNL or TAA HH type codes). Any other changes that need to be made due to increases in medical costs or other conditions will need to be evaluated and made on a client by client basis and entered locally.

### **Payments made through MMIS**

Contract RN, In-Home Agency, Home Delivered Meals and Lifeline services are paid by OMAP based on the local office authorization. For clients who lose medical coverage these payments will automatically stop. For clients who continue to be eligible for medical, local offices will need to review the appropriateness of these services and close or modify them.

### **What if someone is closed who should be open?**

People will be closed in the automatic conversion that turn out to be eligible or who ask for a hearing and will receive Aid Paid Pending. This happens for a variety of reasons. The coding on the CMS record or the Oregon ACCESS Client Assessment record could have been

missing or wrong before the conversion. The person could have requested a hearing but not have had it processed by 03/26/03.

If a case is closed in error the local office staff will need to manually backout the changes that were made by the conversions covered in this memo.

## **Reports**

Reports of the cases affected by the level reductions that are touched by the conversion will be loaded to the View Direct SJU0000R-A report by 03/31/03.

A report of cases that had a LAG code on them will be loaded to the View Direct SJU0000R-A report by 03/31/03.

## **Problems??**

Any problems need to be reported to the Help Desk. This enables us to identify the issue much faster. Be sure to tell them what system and screen you were using and any error message you received (the number of the message is the most help).